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Senate Health Policy Committee  
Room 1100 Binsfeld Building  
201 Townsend Street  
Lansing, MI 48933

C/O: Heather Dorbeck, Committee Clerk

I was very sorry that the meeting scheduled for 29 May 2018 was cancelled. Obviously conflicts occur and Senate business takes precedence. I have a similar conflict on Tuesday 05 June 2018, however a local government process is prohibiting me from attending this committee meeting.

As a member of "MiCHI", I submitted testimony based on consultation with a well known and experienced health care attorney. I am afraid that the legislative analyst, Mr. Stephen Jackson, and the financial analyst, Mr. Michael Siracuse did not appreciate the implications of the creation of a third tier of medicine in the State of Michigan. This bill allows for this process by the statement found on page 2/5 of the analysis: "The bill would define "practice of acupuncture" as the use of traditional and contemporary East Asian medical theory to **assess and diagnose a patient through East Asian medicine techniques**".

Is Michigan ready for this third tier of medicine? Is there substantive evidence to support the use of these varied and sometimes controversial techniques? Does the East Asian medicine techniques include the prescription of herbal medicines?

As nurses who use anatomic acupuncture in their practice as delegated by a physician, we believe that this practice of providing the third tier of medicine is worrisome, particularly the ability to prescribe herbal medicines without knowledge and training in Western pharmacy and pharmaceuticals. Although herbal medicines are not regulated, the potential for harm to patients who may be using these herbal medicines in conjunction with their Western prescribed medicines creates an unsafe situation.

The bill also restricts physician's ability to delegate medical activities. Acupuncture was designated as a medical procedure years ago. Now this bill would change that process. I believe that the physicians will be quite taken aback by this over reach into their realm of practice.

Again, although I believe that it is critical to have some regulatory oversight for the use of acupuncture and a common set of rules, I believe this bill is seriously flawed. There is a fabulous opportunity to create a collaborative committee to revisit the bill and develop legislation that protects the health and well being of residents of the state of Michigan, allows well trained individuals to treat chronic pain and addiction, fulfills the ethical responsibilities of Nursing to alleviate pain and advocate for policies vital to the

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treatment of pain, and create a community of professionals to assist in the care of individuals currently in need of treatment.

I appreciate the ability to submit this testimony. If I may be of assistance, please feel free to contact me.

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